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US



FOR DRUG ENFORCEMENT POLICY AND SUPPORT

1510 DEFENSE PENTAGON WASHINGTON DC 20301-1510

OFFICE OF THE DEPARTMENT OF DEFENSE COORDINATOR



2 3 APR 1997

MEMORANDUM FOR ASSISTANT SECRETARY OF THE NAVY FOR MANPOWER AND
RESERVE AFFAIRS (ATTN: CAPTAIN YORK)
CHIEF, NATIONAL GUARD BUREAU (ATTN: CPT OSBOURNE)
PRINCIPAL DEPUTY ASSISTANT SECRETARY OF THE AIR FORCE
FOR MANPOWER, RESERVE AFFAIRS, INSTALLATIONS AND
ENVIRONMENT (ATTN: MS. THOMPSON)
DEPUTY ASSISTANT SECRETARY OF THE ARMY FOR MILITARY
PERSONNEL MANAGEMENT AND EQUAL OPPORTUNITY
POLICY (ATTN: COLONEL ZALOZNIK)

SUBJECT: Drug Urinalysis Testing Levels

A memorandum on this subject was distributed for Service review on October 28, 1996. Comments were received, the Biochemical Testing Advisory Committee recommended that all specimens "presumptive positive" for amphetamines be screened by gas chromatography/mass spectrometry (GC/MS) for the presence of the designer drugs MDA, MDMA, and MDEA. In this context, a GC/MS assay for amphetamine designer drugs would be conducted regardless of which amphetamine (i.e., amphetamine, methamphetamine, cold medications, or diet medications) initiated the "presumptive positive" assay. If MDA, MDMA, or MDEA was identified, confirmation testing and quantitative analyses at a DoD laboratory certified for amphetamines designer drugs would be conducted. Samples containing designer amphetamines in concentrations equal to or greater than 500 ng/ml of MDA, MDMA, or MDEA would be reported as positive.

The rational for this recommendation is to prevent individuals from using prescription medications, diet medications, and cold medications to mask designer amphetamines abuse. I request that an expedited review of the revised memorandum (attached) be provided to this office by May 5, 1997. My point of contact for this action is Captain John Jemionek, MSC, USN, who may be contacted at (703) 693-1917. Your continued support of the DoD Demand Reduction Program is appreciated.

Robert J. Newberry Principal Director for

Drug Enforcement Policy and Support

Attachment: As stated



MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (M&RA) ASSISTANT SECRETARY OF THE NAVY (M&RA) CHIEF, NATIONAL GUARD BUREAU PRINCIPAL DEPUTY ASSISTANT SECRETARY OF THE AIR FORCE (MRAJ&E)

SUBJECT: Drug Urinalysis Testing Levels

For the past several years, the military drug testing laboratories have been using initial and confirmatory testing levels based on the best technical information and capability available. Routinely, these testing levels are reviewed. Recently, the Department of Defense Biochemical Testing Advisory Committee reviewed the current testing levels and agreed to specify the confirmatory testing levels for MDA, MDMA, and MDEA. The following table provides a consolidated listing of the current initial and confirmatory testing levels.

• • •	Cutoff in ng/ml	
Drug/Metabolite	Initial test	Confirmatory Test (GC/MS)
11-nor-delta-9-THC-carboxylic acid (THCCOOH)	50	15
Cocaine (Benzoylecgonine)	150	100
Opiates* (Morphine) (Codeine) 6-monoacetyl morphine (heroin)	2,000	4,000 2,000 10
Phencyclidine (PCP)	25	25
Barbiturates* (Secobarbital, Phenobarbital Butalbital)	200	200
Lysergic acid diethylamide (LSD)	0.5	0.2
Amphetamines*/Methamphetamines MDA, MDMA, MDEA	500	500 500

^{*} Since amphetamine/barbiturate/opiate-based medications can result in a positive test for these drugs, commands receiving a positive test result for amphetamines, barbiturates, or opiates should consult with the laboratory.

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Specimens containing 500 ng/ml or more of total amphetamine stereoisomers will be reported positive for amphetamine. All specimens containing methamphetamine in concentrations equal to or greater than 500 ng/ml will be tested for isomeric analyses. To be call positive for methamphetamine, the specimen must contain total methamphetamine stereoisomers in a concentration equal to or greater than 500 ng/ml and must contain greater than 20% d-methamphetamine.

All samples, presumptive positive for amphetamines and sent forward for amphetamines confirmation analyses, will be evaluated for the presence of the designer drugs, MDA, MDMA, and MDEA. The presence of amphetamine designer drugs in the GC/MS chromatograph will be assayed regardless of the presence in the GC/MS chromatograph of amphetamine, methamphetamine, cold medications, or diet medications which may have initiated the positive screen assay. If MDA, MDMA, or MDEA are identified, confirmation testing and quantitative analyses at a DoD laboratory certified for amphetamines designer drugs will be conducted. Samples containing designer amphetamines in concentrations equal to or greater than 500 ng/ml of either MDA, MDMA, or MDEA will be reported as positive.

Changes, if necessary, to the amphetamines and methamphetamines reporting procedures are effective June 1, 1997, to allow sufficient time for the laboratories to implement appropriate changes in their laboratory procedures manuals. Nothing in this memorandum abrogates the responsibility of the laboratory supervisors and staff for documenting and maintaining the scientific and forensic integrity in the reporting of positive samples as described in DoD Instruction 1010.16, "Technical Procedures for the Military Personnel Drug Abuse Testing Program."